

As the World No Tobacco Day approaching (the end of May), the World Health Organization Regional Office for the Eastern Mediterranean announced the results of the second stage of an important survey which was developed by WHO in collaboration with the Centres for Disease Control and Prevention (USA), International Agency for Research on Cancer, Emory University (USA) and University of New South Wales (Australia) on smoking among the Health Professionals.

11.000 health professionals in five countries of the WHO Eastern Mediterranean Region (Egypt, Jordan, Libyan Arab Jamahiriya, Qatar and Saudi Arabia) completed the second round of the Health Professionals Survey, which first round was administered in several WHO Member States Oman, Bahrain, Iran, Sudan and Kuwait.

97.9% of survey participants agreed that smoking is harmful to health. However 33% reported as current or former smokers and 67% of respondents reported that they had never smoked. 10% reported having successfully quit smoking and 23% were current smokers.

Of the respondents, 7613 (70%) were physicians, 701 (6%) were dentists, 1394 (13%) were nurses and 1226 (11%) worked in supporting professions. The sample consisted of 66% males and 34% females. Survey respondents worked in a variety of health care settings. The average age of respondents was 39 years.

The proportion of smokers was 32% among male respondents and 5% among female respondents. Among males, nurses had the highest proportion of smokers; among females, the highest proportion of smokers was among physicians, reporting an average consumption of 16 cigarettes a day. The lowest average consumption was in Saudi Arabia (11 cigarettes); the highest was in Jordan (19 cigarettes).

The survey showed that smoking affects the image of the Health professionals as role models for their patients. 83% of non-smoking health professionals reported that they believed that a physician who smokes is less likely to advise his/her patients to stop smoking. 70% of health professionals who smoked regularly also identified this as a problem. Overall, only 53% of respondents reported feeling “well prepared” to give counselling on smoking cessation, while another 30% reported feeling “somewhat prepared”. Among those who reported feeling “well prepared”, over 94% used counselling.

Health professionals responding to the survey overwhelmingly supported banning smoking in enclosed public places (97%), using large-print health warnings on cigarette packaging (87% of smokers and 93% of non-smokers), banning sales to minors (97%), banning sport sponsorship by the tobacco industry (92%), banning tobacco advertising completely (97%), and making hospitals completely smoke-free (96%).

The only policy action over which smokers and non-smokers disagreed was significant price increases. 84% of non-smokers supported sharp increases as a measure to assist smokers in quitting and to prevent young people from starting to smoke. Despite the direct effect of this on smokers, 66% of health professionals who smoke supported sharp price increases.

The survey also concluded that smoking cessation support for health professionals themselves could yield a double benefit: improved health for physicians who successfully quit smoking, and a larger pool of health care professional role models who can assist others to quit smoking.

Despite 72% of respondents reporting lack of availability of interventions (other than counselling) for patients who smoke, physicians can offer a range of effective smoking cessation interventions to their patients. Expanding access to medication and self-help, coupled with improved smoking cessation counselling training for physicians, would expand coverage of effective smoking cessation interventions in the countries surveyed.

More than 75% of health professionals in the countries surveyed consistently agreed with the need to implement the elements of comprehensive tobacco control. For all but price increases, support was virtually unanimous. Thus, health professionals are well positioned to advocate for and support the implementation of comprehensive tobacco control.

The details of the survey in the five countries will be available as part of the media material that will be distributed during the celebration of World No Tobacco Day that will be held on 30 May 2005 in WHO/EMRO premises in Cairo. The celebration will also witness honouring 6 tobacco control advocates in the Region namely: Dr Ahmed Hamed Atteya and Professor Dr Sherief Omar (Egypt), Mr Khalid Sibaihi (Saudi Arabia), Professor Dr Ibrahim El-Gharbi (Tunisia), Professor Dr Mohamed Bartal (Morocco ) and a candidate from Pakistan.

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